

The assessment of the ESF support in undergraduate medical education

Information brochure



The objective of the evaluation
was the assessment of the quality and effects of the ESF intervention in undergraduate medical education under Measure 5.3 and 5.5 of the Operational Programme Knowledge Education Development (OP KED). The objective of the research was achieved adopting following criteria:

Accuracy

Efficiency

Effectiveness



State of medical staff in Poland

In 2016, about 15% of the population of the country constituted people aged over 65 - according to the estimations, by 2023 it will be every fourth inhabitant of Poland. Above-mentioned fact determines the necessity to educate an adequate number of medical staff - currently both the indicator regarding the number of doctors per 10 thousands residents, and the corresponding indicator concerning the number of nurses are lower than the average for countries constituting the part of OECD. In 2018 there were 58 doctors, 87 nurses and midwives per 10 thousands residents. Poland should strive for the standards observed in highly developed European countries, e.g. in Finland and Denmark the number of nurses and midwives per 1 thousand residents amounts to 14, taking into consideration the dependence that there should be about 4-4.5 nurses per doctor.

Given abovementioned facts and the forecasts for the demographic development for Poland, about 520-528 thousand nurses and about 130-132 thousand doctors will be needed in the country in 2030. The intervention conducted under Measures 5.3 and 5.5 will partially respond to the needs in this scope (about 2% of the future demand for medical professionals).

Support for students

As a result of implemented projects, a total of 8 651 students in the fields of medicine, dentistry, nursing and midwifery benefitted from the support. 3 233 students (36% of the total number of participants) completed the project (finished their studies). 146 people (2% of participants), withdrew from the project. The remaining participants (5 418 people, that is 62%) continue their participation in the project:

- 1 845 people benefitted from the support for less than a year;
- 882 benefitted from the support for from 1 to 2 years;
- 87 participated in the project for 2 to 3 years.



The Operational Programme Knowledge Education Development implements five Measures under the Priority Axis V Support for healthcare:

- **Measure 5.1 Prevention programmes;**
- **Measure 5.2 Quality-focused activities and organizational solutions in the healthcare system facilitating access to inexpensive, durable and quality health services;**
- **Measure 5.3. Quality medical education;**
- **Measure 5.4. Professional competences and qualifications of medical staff;**
- **Measure 5.5. Development of nursing services.**

Two of the abovementioned Measures (5.3, 5.5) are directed to universities conducting medical education at the undergraduate level.

Over PLN 738 M was allocated for the implementation of projects in this scope.

104 projects were approved for implementation as a result of calls for proposals: 79 projects under Measure 5.3 and 25 projects under Measure 5.5.

The value of signed contracts for co-financing amounted to over PLN 609 million, constituting 83% of the total allocation for the implementation of the abovementioned Measures.



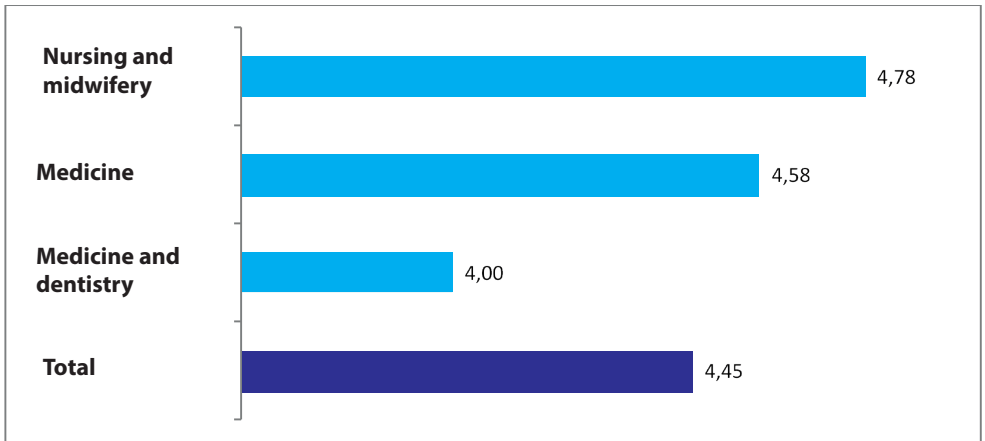
Students' average rating of the quality of education in the university before the implementation of projects



Students' average rating of the quality of education in the university after the implementation of projects

Students expressed their satisfaction resulting from their participation in the project. Students of nursing and midwifery assessed it in the most positive manner, in this group the most considerable effects of implemented projects can also be observed.

To what degree are you satisfied with your participation in the project? Please rate on a scale from 1 to 5, where 1 means "very dissatisfied" and 5 – „very satisfied".



Source: CATI research with participants of medical studies (n=55), medical and dental studies (n=5), nursing and midwifery (in Measure 5.3 n=336)



Conclusions and recommendations



Conclusion	Recommendation
<p>The most considerable effects of support concern the students of nursing and midwifery. This group was covered by a diversified, comprehensive support, including the possibility of using the improved learning facilities (MSCs), additional classes, extracurricular internships and motivating scholarships. Comprehensive support should be acknowledged as the reason behind the most considerable effects observed in relation to this group.</p>	<p>It is recommended to implement future measures intended for medical students, taking the need for a comprehensive support into consideration. Such support covering various aspects of the teaching process might ensure the most considerable effects in the form of an increase in the number of medical graduates. The intervention combining investments in learning facilities and motivational activities ensures the optimal effects.</p>
<p>Obtained financing was insufficient for: - provide employees and students with adequate salaries and scholarships on the level that would encourage participation in the project, - finance all necessary and expected extracurricular activities and study visits, including foreign visits, The reason for the lack of implementation of the above tasks was the insufficient funding and the lack of eligible expenditures.</p>	<p>It is recommended to increase the support for the implementation of projects in the scope of implementing development programmes for medical universities, including the allocation of funds for the organization of a larger number of classes for both students and the academic staff (primarily in foreign centres with more experience in running Medical Simulation Centres) and the inclusion of higher remuneration and scholarships in the scope of eligible expenses.</p>
<p>The beneficiaries were not able to refer to the provisions of the audit assessing Medical Simulation Centres conducted in 2014, although the post-audit document was binding, which led to the necessity to incur expenses that were irrational according to individual universities.</p>	<p>In the perspective of 2021-2027, changes should be introduced in relation to the possibility of exceptions in the expenditure plan adopted in the future in the post-audit document, even if the application of the provisions of this document will be required as part of a given competition</p>

Conclusion	Recommendation
<p>One of the main difficulties encountered by the beneficiaries implementing projects were problems related to interpreting legal provisions concerning the implementation of projects co-financed from EU funds. Furthermore, difficulties resulted from the necessity to apply public procurement law. It shall be concluded that the project departments of beneficiaries need support in this scope.</p>	<p>As part of the financial perspective 2021-2027 it is recommended to intensify trainings for beneficiaries regarding the application of public procurement law and other legal provisions to the extent necessary for the proper implementation of projects.</p>
<p>Currently most of Medical Simulation Centres use comparable laboratories - the equipment and the specificity of laboratories are comparable. There were no universities that would be characterised by a different resources in the scope of owned equipment.</p>	<p>The possibility of specialising centres within an individual field should be considered. The development of a given centre in a specific field (e.g. in gynecology and midwifery), while maintaining other laboratories as part of MSCs should ensure measurable benefits to medical universities, including effects in the scope of inter-university cooperation</p>
<p>The indicator regarding the number of doctors and nurses per 1 thousand residents is lower in Poland than in the case of countries participating in the OECD. It is estimated that due to socio-demographic changes, the demand for medical staff will increase.</p>	<p>It is recommended to continue the intervention intended for medical students. The support should take the form of comprehensive development plans targeted at a broad range of students from the medical fields. The intervention should include the possibility of providing students with the support from their first year of studies.</p>



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